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Nursing pharmacology: A comparison of separate course versus integrated concepts in an associate degree nursing program

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During the infancy of professional nursing, Florence Nightingale acknowledged in the Notes on Nursing that ignorance of medicinal properties could cause adverse outcomes. In 1919, the National League of Nursing Educators recommended that pharmacology be a part of the standard nursing curriculum. Contemporary nurses need thorough pharmacology knowledge for clinical practice to ensure public safety. Therefore, it is important to discover a teaching methodology in nursing education to enhance retention of pharmacology knowledge. A retrospective, causal, comparative quantitative study was conducted: to determine whether there was a difference in mastery of pharmacology knowledge between students in a separate pharmacology course and those for whom pharmacology concepts were integrated into other nursing courses, and; to determine if there was a difference or relationship between mastery of pharmacology knowledge of ADN graduates and their age, gender, or previous direct healthcare experience. Mastery of concepts was measured by Assessment Technologies Institutes Registered Nurses Comprehensive Predictor Pharmacological and Parenteral Therapies section scores. The results of the research demonstrate that teaching pharmacology, as a separate course as opposed to integrated pharmacologic didactic content did not increase students' pharmacology scores. The performance scores of the ADN graduates on the Pharmacological section were comparable within and between variables. Educators should focus on delivering the pharmacologic content to all students equally. Finding an effective method of teaching pharmacology that enhances retention for clinical application can reduce medication errors. A graduate that experiences enhanced pharmacology retention for application through effective teaching methodology can benefit the public.

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Integrating IFNA generalist competencies for family nursing practice into nursing curricula: Development and evaluation

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Family nursing theory and practice has evolved over the past four decades, is taught in many nursing programs and continues to grow in value worldwide. The International Family Nursing Association Committee on Family Nursing Practice recently developed core competencies for professional generalist family nursing practice, the IFNA position statement on generalist competencies for family nursing practice. This presentation will share the competencies and discuss evaluating generalist curriculum regarding family nurse care. Ten family nursing scholars from 6 countries used an iterative process involving reflection and discussion about family nursing science, practice models, theory and terminology and debated the identification of core competencies. Themes were developed and refined during the online discussion. Two members synthesized the information and prepared a final draft. The IFNA Education Committee and the membership reviewed the final draft before approval by the IFNA board of directors. Once the competency document was published, family nursing faculty from Wright State University developed a protocol for evaluation of the new family competencies in SON undergraduate curriculum. The generalist competency for family nursing practice has five core competencies and related sub-competency indicators. It provides a foundational framework to guide international generalist nursing practice when caring for families. This position statement can be used to guide curriculum development in undergraduate nursing education, program evaluation and research. The position statement and curriculum evaluation documents will be shared, as well as the process for generalist nursing programs' curricular evaluation of content to assure competencies in care of families.

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